AMENDMENT TRANSMITTAL LETTER						Docket No. 0230-0245PUS1	
Application No. 10/571,069-Conf. #2459		Filing Date December 7, 2006		Examiner C. M. Borgeest		Art Unit 1649	
Applicant(s): Hidemi KURIHARA et al.							
Invention: THERAPEUTIC AGENT AND THERAPEUTIC METHOD FOR PERIODONTAL DISEASES AND PULPAL DISEASES							
MS AF Commissioner for P.O. Box 1450 Alexandria, VA 22	313-1450						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.							
CLAIMS AS AMENDED							
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate			
Total Claims	28	- 30 =	0	x 26.00		0.00	
Independent Claims	5	- 5 =	0	x 110.00		0.00	
Multiple Dependent Claims (check if applicable)							
Other fee (please specify):							
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:						0.00	
Large Entity x Small Entity							
x No additional fee is required for this amendment.							
Please charge Deposit Account No in the amount of \$ A duplicate copy of this sheet is enclosed.							
A check in the amount of \$ is enclosed.							
Payment by credit card. Form PTO-2038 is attached.							
The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed.							
x Credit any overpayment.							
x Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.							
Gerald M. Murphy, Jr. Dated: June 10, 2010							
Attorney Reg. N							
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